

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2016 FEB 22 AM 7:19

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ARKANSAS RICE PRODUCERS GROUP INC POLITICAL
ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 23915

Check if different
than previously
reported. (ACC)

LITTLE ROCK

AR

72221-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00525691

3. IS THIS
REPORT

☒ NEW
(N)

OR

☐ AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☒ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

MM / DD / YYYY

in the
State of

State

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the
State of

State

5. Covering Period

07 / 01 / 2015

through

12 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ASST. TREAS. CHAD CAUSEY

Signature of Treasurer

Chad Causey

Date

01 / 29 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ARKANSAS RICE PRODUCERS GROUP INC PAC

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2015

To:

MM / DD / YYYY
12 / 31 / 2015

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1,

2015

604431

- (b) Cash on Hand at
Beginning of Reporting Period.....

304431

- (c) Total Receipts (from Line 19).....

6300

6300

- (d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....

310731

7. Total Disbursements (from Line 31).....

0

300000

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d)).....

310731

310731

9. Debts and Obligations Owed **TO**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0

10. Debts and Obligations Owed **BY**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ARKANSAS RICE PRODUCERS GROUP, INC

Report Covering the Period:

From:

07

01

2015

To:

12

31

2015

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

**12. Transfers From Affiliated/Other
Party Committees.....**

13. All Loans Received.....

14. Loan Repayments Received.....

**15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....**

**16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....**

**17. Other Federal Receipts
(Dividends, Interest, etc.).....**

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶**

**20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶**

0

0

0

0

0

0

0

0

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6300

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6300

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6300

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6300

6300

Page 4

COLUMN B
Calendar Year-to-Date

32. Total Federal Disbursements
(subtract Line 21(a)(ii) and Line 30(a)(ii)
from Line 31).....

0

0

1000

[illegible]

1. *Journal of the American Medical Association*, 1997; 277: 1039-1043.

1000

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans)
(from Line 11(d), page 3)
34. Total Contribution Refunds
(from Line 28(d))
35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))
37. Offsets to Operating Expenditures
(from Line 15, page 3)
38. Net Operating Expenditures
(subtract Line 37 from Line 36)

0
0
0
0
0
0

0
0
0
0
0
0

2016-02-22 PM 00:15:16

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ARKANSAS RICE PRODUCERS GROUP, INC PAC

Full Name (Last, First, Middle Initial)

A. Baerman for ARKANSAS

Mailing Address

P.O. Box 671

City

ROGERS

State

AR

Zip Code

72757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

REFUND

Aggregate Year-to-Date ▼

63.00

Date of Receipt

9 / 23 / 2015

Amount of Each Receipt this Period

63.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

63.00

TOTAL This Period (last page this line number only).....▶

63.00

2016-02-22-07:0005-1578

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 1/30/16 Date of Receipt 2/22/16
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER
(3/2015)

[Signature]

2/22/16
DATE PREPARED

NOT FOR FILING